File with: File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



CAMPAIGN DISCLOSURE BO.

2009 SEP -3 PM 12: 59

## FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SI	UMMARY PAGE		
COMMITTEE NAME (Must be same as on Statement of Organiza			
KING FOR MEK WOOD BOARD		FOR DR	
IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) St (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Boar 11) Local Ballot Issue	tate PAC (3)State Party (7)School Board or Other Political	(Rev. 0	
CANDIDATE COMMITTEES ONLY: Candidate Name FOVILL & KILLE	Political Party (if applicable)	Logged I Scanned	n
Office Sought MULLINEOD COLUMNITY COLLEGE	District (if Senate or House)		
DISTELCT 9 Late reports are subject to possible civil and criminal penalties. Pursus	ant to lowe Code sections 688.32A	A(7) and 68A.401(	3), the candidate, for a
Outo	319-721-4303	3 9	13109
SIGNATURE OF PERSON/FILING REPORT	TELEPHONE		DATE SIGNED
AM FILING A FUTTH DAY PRUDE TO ELECT (report date) REPORT	REPORT FOR (1) ELECTION Indicate by f	/(2)NON-ELEC	TION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	_		, enter Date of Election
Check if this is final (termination) report and attach Notice of Discovery (You must continue to file reports until a DR-3 is filed.)		, , ,	ommittees, enter County in
STATEMENT OF CASH ON HAND			
CASH ON HAND at the beginning of the reporting period. (Total of committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first necessary.)	n on hand at the end	\$	0
ADD TOTAL MONEY TAKEN IN THIS PERIOD			1 4
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		439*
Schedule F: Loans Received total (Attach Schedule F)	······································	<u> </u>	
Schedule H: Total Sales of Campaign Property (Attach S	Schedule H)		
(Schedule H applies to Candidates' Committee	<u>ses Only)</u> SUB-TOTAL		4392
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	OOD-10 INE	· ·	
Schedule B: Expenditures total (Attach Schedule B) (**a	iso see debts and loans below).		10 2
Schedule F: Loan Repayments total (Attach Schedule F	·		
CASH ON HAND at the end of this reporting period (if final report			4299
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule			
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F			
CONSULTANT BREAKDOWN (Schedule G Attached?)		YE	sNO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	<b>\$</b>	
STATE COMMITTEES: Submit a reconciled campaign account b	pank statement in January of eac	ch year.	

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

LUGGOR LUCKWOOD BORSO COLLUTES

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO
2/01		Ill man	(ii applicable)		RAISEI
8 28 09 8 28 09	CK#	CAPTERISTIONS		\$239-	
01	ID#	<b>सक्छ ८०९८</b> त			
0128109	CK#	2511 SHOWN Q NW CEDAL DAPIDS, 1252405		\$200-	
	ID#	CODE UPPLOS, 1652405			
·	CK#				
	ID#				
	CK#		·		
	ID#				
	CK#				
	ID#				L
	СК#				
	ID#				<u> </u>
	CK#				
	ID#				
1.	CK#				
	D#				
	CK#				
——————————————————————————————————————	D#				
	CK#				
			SUB-TOTAL		

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by familial relationship, enter "not applicable" in the relationship column.

Page ( of (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

**8TATE PAC COMMITTEES:** NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
LINE	> FOR KI	ex 2000 boses lox	um TES	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
811109	CK#	UNIL COUNTY ANDITOR MOSTRALE MAIL	PORESTRUCTURE UST DISTRICT 9	\$ 10-
	ID# CK#	CODAL VAPIDS, 12 52405		
	ID# CK#			
	ID# CK#			
	ID# CK#			
1	ID# CK#			
	ID# CK#			
ĺ	ID# CK#			

THIS BOX APPLIES TO (	 MARI I CES UNIL I :

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to

Page	1	of	j	
· -B-		UI		

SUB-TOTAL

TOTAL (If last page of this schedule)

(for Schedule B)

10-

10-